

## Appendix 1: ICS Strategy: How can future CYP MH model deliver ICS priorities?

NHS Kent and Medway are taking the opportunity presented by the procurement process and ensure that new contracts will deliver evidence-based best practice care. We want our services to be targeted at the right time so they can help prevent children and young people becoming seriously unwell and provide specialist care when needed. Therefore, alongside engagement with providers and the market testing activity, we have established a clinical reference group (CRG), comprised of children and young people's mental health specialists, to develop an evidence-based model of care.

ICS Strategy Priority	How the can a future CYP MH model deliver against the ICS priorities?
<b>Giving children the best start</b> in life and working to make sure they are not disadvantaged by where they live or their background and are free from fear or discrimination.	Focus on <b>removing the inequity</b> that has been built into numerous contracts and ways of working. New model can build on <b>place</b> and <b>neighbourhood points of access</b> and <b>support</b> . <b>Locally defined services</b> can address specific and local inequalities and population needs which tie in and complement a whole K&M therapeutic approach to care.
Helping the most vulnerable and disadvantaged in society to improve their physical and mental health; with a focus on the social determinants of health and preventing people becoming ill in the first place.	Focus on meeting needs first and early. It will enable system partners to invest and plan together on preventative/wider determinants of health interventions. The place-based components will be able to identify their most vulnerable populations and design services to meet their needs. Exploring personal health budgets at neighbourhood level as an integral component to any future model will test a new approaches to direct support and solution finding.
Helping people to manage their own health and wellbeing and be proactive partners in their care so they can live happy, independent and fulfilling lives; adding years to life and life to years.	Implementation of <b>iTHRIVE</b> to give a framework & language to <b>describe &amp; navigate</b> the information and support on offer. This will be hand in hand with a <b>transformed digital offer</b> and implementation of the CYP MH <b>Communication and Engagement</b> Strategy, making mental health ' <b>everyone's business</b> ' and giving the tools to manage within family, friend and communities.
ICS Strategy Priority	How the can a future CYP MH model deliver against the ICS priorities?
Supporting people with multiple health conditions to be part of a team with health and care professionals working compassionately to improve their health and wellbeing.	
Supporting people with multiple health conditions to be part of a team with health and care professionals working compassionately to	priorities?  Children who are looked after or care leavers, those on the criminal justice pathways, trans young people, autistic people and those with ADHD will remain a focus of any CYP MH programme. Models of care where specialist interventions are delivered by a variety of experts, skilled with working with particularly vulnerable young people will be rolled-out. How can supervision, consultation and psychoeducation

## Future model of children and young people's integrated care 2023/24

and their

families

Kent and Medway Children's Programme Board and Joint Commissioning Sub Group have adopted the below model of integrated care for children and young people. This model commits future services and provision to working at neighbourhood, place and system-level.

System: Improving access, embedding efficiency, improving standards and reducing barriers to local delivery Place: Developing local models that meet the needs of Place-based point of access/triage the local population and reducing inequalities at points of transition **Neighbourhood/Clusters:** Providing information Integrated/coordinated pace-based and support early and close to home and school

Roll-out /expansion of neighbourhood/cluster level workforce including social prescribing, navigators and mental health practitioners embedding of the K&M CYP MH Competency Framework and standing up neighbourhood level professional networks

Implementation of early screening and support first model in primary schools and early years

Local directories for ease of access to local support and earlier intervention

for all children with clear pathways

or locality teams delivering mild to moderate and targeted interventions

Locally defined and managed voluntary sector offer to support identified communities and vulnerable groups

Lived experience leadership embedding children's voice into service development, delivery and improvement

Specialist or system-expert input and support in children's triage and assessment (MDT)

Specialist health and care interventions and pathways, for example:

- Delivering statutory requirements
- Looked after children and UASC
- Trauma, exploitation, youth violence, health and justice, conduct, sexual harm
- Crisis, urgent and emergency care
- Complex care. interventions and support
- Learning disabilities
- Neurodevelopment diagnostic pathway
- Specialist consultation and support for system partners

Interface with T4 inpatient and forensic pathways, eating disorders etc.

**Key Enablers** Single IT system and child ntegrated workforce growth, training and competencies health, Local Authorities and adult services with cleat accountability and delegation Lived Experience leadership and coproduction throughout **Embedding THRIVE and social** ntegrated Communications and Engagement Strategy Directory of Services and Clear and effective pathways that are safe and deliver high quality care Total resource and coordinated investment focussed on prevention and earlier